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CONFIRMATION NO. 5094

<b>SERIAL NUMBER</b> 10/090,472	<b>FILING OR 371(c) DATE</b> 03/04/2002 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3734	<b>ATTORNEY DOCKET NO.</b> ENDOV-55672
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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/562,295 05/01/2000 PAT 7,135,037 *yes, 1/2*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

04/08/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 15	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>				

## ADDRESS

24201

## TITLE

Modular graft component junctions

<b>FILING FEE RECEIVED</b> 1212	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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